Bureau of Health Care Quality and Compliance

	STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:			(X2) MULTIPLE CONSTRUCTION A. BUILDING		(X3) DATE SURVEY COMPLETED	
		NVS5777PCS		B. WING		03/1	8/2010
NAME OF PR	OVIDER OR SUPPLIER		STREET ADD	RESS, CITY, STA	ATE, ZIP CODE		0/2010
BEEN THE	ERE, INC			RYLAND PKW S, NV 89123	VY STE 124		
(X4) ID PREFIX TAG	(EACH DEFICIENC	ATEMENT OF DEFICIENCIES Y MUST BE PRECEDED BY FU LSC IDENTIFYING INFORMATI		ID PREFIX TAG	PROVIDER'S PLAN OF CORREC (EACH CORRECTIVE ACTION SHO CROSS-REFERENCED TO THE APPR DEFICIENCY)	ULD BE	(X5) COMPLETE DATE
P 000	Initial Comments			P 000			
	a result of the Initial S begun at your agency finalized on March 18 Licensure survey was of Chapter 449, Perso These findings and co investigation by the H construed as prohibit investigations, actions that may be available applicable federal, sta The agency had appl Personal Care Aide A in-home personal car disabled persons. One employee file wa Policy and Procedure	s conducted by the authonal Care Agencies. onclusions of any lealth Division shall not ing any criminal or civil s or other claims for relie to any party under ate or local laws. ied for a license as a Agency which provides re services to elderly and as reviewed along with the Manual.	and nority be ief				
P 020	identified. Section 12 Criminal E	Background		P 020			
	forth in NAC 449.011 to operate an agency Repository for Nevad History two complete submission to the Ferfor its report. 2. The Central Repositional History shall whether the applicant	t has been convicted of aph (a) of subsection 1	cense ntral gation ds of				

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

	TATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CL IDENTIFICATION NUMBER			(X2) MULTIPLE CONSTRUCTION A. BUILDING		(X3) DATE SURVEY COMPLETED		
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BEEN THE	ERE, INC			MARYLAND PKWY STE 124 EGAS, NV 89123				
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P 020	Continued From page	e 1		P 020				
	administrator of the agency, if any, and the Health Division of whether the applicant has been convicted of such a crime. This STANDARD is not met as evidenced by:							
	Based on review of the Employee #1, the rec		e					
P 050	50 Section 14.1(a-e) Administrator Qualifications		ıs	P 050				
	Section 14.1(a-e) Administrator Qualifications Sec. 14. 1. The administrator of an agency must: (a) Be at least 18 years of age; (b) Have a high school diploma or its equivalent; (c) Be responsible and mature and have the personal qualities which will enable him to understand the problems of elderly persons and persons with disabilities; (d) Understand the provisions of this chapter and chapter 449 of NRS; and (e) Demonstrate the ability to read, write, speak and understand the English language.							
	Based on review of a the was no evidence		el file chool					
P 060	Section 14.1(2) Admi	nistrator Responsibilitie	es	P 060				
	the licensee in the da	of an agency shall repre illy operation of appoint a person to exe						

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NAME OF PF	ROVIDER OR SUPPLIER		STREET ADDRE	ESS, CITY, STA	ATE, ZIP CODE		
BEEN THI	ERE, INC		8760 S MAR' LAS VEGAS,		VY STE 124		
(X4) ID PREFIX TAG	(EACH DEFICIENC)	ATEMENT OF DEFICIENCIES Y MUST BE PRECEDED BY FU SC IDENTIFYING INFORMAT		ID PREFIX TAG	PROVIDER'S PLAN OF CORRECT (EACH CORRECTIVE ACTION SHOU CROSS-REFERENCED TO THE APPRODE	ILD BE	(X5) COMPLETE DATE
P 060	for their training; (b) Ensuring that only providing services to and that such service accordance with the f client, the service plan estable policies and procedur (c) Developing and imand reporting system fiscal experience and the agency; (d) Negotiating for serin accordance with leg	sence. The administrator include, administrator include, ad personnel and arrange trained attendants are a client of the agency is are provided in functional assessment of the agency; aplementing an account that reflects the current financial position of the provided by continuous and the continuous areas of the agency; appears the agency of the agen	of the d the ting on of	P 060			
	agency as necessary the agency receive ne (f) Developing and im procedures for the ag without limitation, poli concerning terminatin services provided to a client; (g) Designating one of agency to be in charge those times when the (h) Demonstrating to request that the agen resources and the cap requests of each clier the	nt and direction for members of the staff or to ensure that the clienceded services; plementing policies and ency, including, cies and procedures in the personal care or more employees of the of the agency during administrator is absent the Health Division upon the pability to satisfy the int of the agency related and care services described.	nts of d ne t; and on				

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P 060	Continued From page	e 3		P 060					
	Based on record revi agency failed to prov Personal Care Attend Based on record revi failed to have an emp	ew and interview, the a	or the						
P 140	Section 15(5) Infection	ous Disease		P 140					
	5. Provide for the prevention, control and investigation of infections and communicable diseases;								
	Based on policy and and staff interview, the method for preventing	This STANDARD is not met as evidenced by: Based on policy and procedure document review and staff interview, the agency failed to develop a method for preventing, controlling and investigating infections and communicable diseases.							
P 160	Section 15(7) Attenda	ant Assignment/Superv	ision	P 160					
	the agency assigns a personal care service								
	Based on record revi agency's policies and	not met as evidenced b ew and interview, the d procedures did not pro nanner in which it assig	ovide						

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P 160	Continued From page	e 4		P 160					
	attendants to provide	services.							
	reviewed. The manu description of how the to provide services to coordinator was inter-	e agency assigns attend clients. The staffing viewed and provided a how assignments are m	dants						
P 190	Section 15(10) Coordination with Agencies 10. Set forth the roles of the agency and any coordination that the agency will provide with services provided by other community service agencies;			P 190					
			′						
	Based on record reviewal lacked a policy setting	not met as evidenced bew and interview, the ag g forth the role of the ag coordinates with other gencies.	gency						
P 210	Section 15(12) Perso	nnel Records		P 210					
	12. Provide for the mapersonnel records who policies and procedure		and						
	Based on record revieus agency failed to provicurrent personnel record	not met as evidenced bew and staff interview, to de for the maintenance words which confirm that the were being followed	the of t the						
		records and the agency res revealed a lack of	/'s						

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P 210	Continued From page	e 5		P 210			
	documents required to be maintained in the personnel files.						
P 220	220 Section15(13) Special Client Needs P 220						
	13. Set forth any other necessary based on special populations se	-	nat is				
	Based on review of rethe agency failed to h	not met as evidenced becords and staff intervienced a policy or procedule thod to address any sp	ew, ure				
P 230	Section 16.1(a-i) Pers	sonnel File		P 230			
	kept for each attendade must include, without (a) The name, address the attendant; (b) The date on which working for the agence (c) Documentation that tests or obtained the by NAC 441A.375; (d) Evidence that the attendant were check (e) Evidence of compathe administrator of the person licensed to opprespect to the attendade (f) Proof that, within 60 began working for the attendant obtained a cardiopulmonary results.	limitation: as and telephone numb in the attendant began by; at the attendant has ha certificates required references supplied by ited by the agency; liance with NRS 449.17 ine agency or the perate the agency with ant; is months after the atten	er of d the the 79 by dant				

Bureau of Health Care Quality and Compliance

	OF DEFICIENCIES F CORRECTION	(X1) PROVIDER/SUPPLIER/O		(X2) MULTIF	PLE CONSTRUCTION	(X3) DATE SI COMPLE			
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P 230	Continued From page	e 6		P 230					
	age; (h) Proof of possessic least the minimum lia coverage required by will be providing transmotor vehicle; and	ndant is at least 18 year on by the attendant of a bility insurance state law if the attenda sportation to a client in a all training attended by	nt a						
	This STANDARD is not met as evidenced by: Based on record review and interview, the agency did not have a method to document that the references provided by potential employees will be checked.		gency						
	certification from a lic	ew of employee #1, hysical examination or ensed physician that m IAC 441A.375 3.(a) wa							
		ecords, the agency faile procedure to document evaluation on there							
P 280	Section 17/1(2) Docu	mentation of Supervision	on	P 280					
	must be documented documentation must l administrator or his de supervisory visit and consist of an evaluation	be dated and signed by esignee. Each each telephone call mu	the						

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

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P 280	Continued From page	e 7		P 280			
	been followed; (c) The service plan emeeting the personal client; (d) The attendant proservices to the client I training relating to the the attendant is provide) It is necessary for designee to follow up client concerning any care services being p service plan establish	established for the clien established for the clien care needs of the viding personal care has received sufficient e personal care services ding to the client; and the administrator or his	t is s that a nal the e				
P 450	Based on review of do the agency failed to p documentation of staf site by visit or by telep Section 21.1(2) Griev	if supervision conducter others. ance Procedure of an agency shall estal	view, d on	P 450			
	grievances, incidents the agency in accorda policies and procedur procedure established administrator must inditat the administrator notified of each grieva. The administrator or h	and complaints concer ance with the written es of the agency. The d and enforced by the clude a method for ensi- or his designee is ance, incident or complais designee shall the matter in a timely	uring				

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P 450	Continued From page	e 8		P 450				
	agency must be notified response to the grieve	an incident concerning tied of the action taken it ance, complaint or repo	n					
	Based on record revi agency failed to prov	This STANDARD is not met as evidenced by: Based on record review and staff interview, the gency failed to provide a procedure for rievance resolution that met all regulatory equirements.						
	A review of documentation revealed a lack of a method for documenting the process, including, communication between the administrator and the client concerning grievances, complaints and incidents.							
P 490	Section 22.1(1-2) Init	ial Client Screening		P 490				
	designee shall conduscreening to evaluate requests for personal develop a service plate service plan establish 2. The initial screening acceptance of a service documented. The document and signed by the personal screening acceptance of the service of the servic	e each prospective clier I care services and to an for the client or to acc ned for the client. ag and the development	et's cept a t or ated e					
	Based on record revi agency failed to prov initial screening docu	not met as evidenced bew and staff interview, ide documentation of all ment that included the person who conducted	the n date					

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P 490	Continued From page 9			P 490			
		screening. The agency also failed to lop a document for developing a Service for each client.					
P 500	Section 22.1(3) Prior	to Initiation of Services		P 500			
			ned e nt nt nt the and cillities e ation; contacts sesist d e				

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P 500	Continued From page	e 10		P 500			
	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)						